SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

lles somewate soles delle (a)				MBER	:	PAGE	1	63 OF	467
Use separate schedule(s) for each category of the	(cł	ne	i						
Detailed Summary Page		×	11a	11b		11c		12	
, ,			13	14		15		16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) NRCC Full Name (Last, First, Middle Initial) MR. GEORGE R. EDINGER Date of Receipt Mailing Address 2683 CASARAH PL 2015 19 City Zip Code State Transaction ID: SA11.15831210 MO WRIGHT CITY 63390-Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. **CONTRIBUTION** Name of Employer Occupation INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. MR. FOSTER FRIESS Date of Receipt Mailing Address POST OFFICE BOX 9790 02 19 2015 City State Zip Code Transaction ID: SA11.15838372 **JACKSON** WY 83002-9790 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. CONTRIBUTION Name of Employer Occupation FRIESS ASSOCIATES, INC. INVESTMENT CONSULTANT Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. MRS. SARAH F. GINN Date of Receipt Mailing Address 8459 WOOLWORTH AVE 02 19 2015

SUBTOTAL of Receipts This Page (optional)													
	SUBTOTAL of Receipts This Page (optional)		▶	Ξ		7		I	7		550	0.00)
TOTAL This Period (last page this line number only)	TOTAL This Period (last page this line number	only)	···· >		_	7	_		7	_	_	_	

Zip Code

68124-1362

INFORMATION REQUESTED PER BEST EFF

250.00

State

NE

С

Occupation

Aggregate Year-to-Date ▼

250.00

Transaction ID: SA11.15831482

Amount of Each Receipt this Period

CONTRIBUTION

City

OMAHA

FEC ID number of contributing

INFORMATION REQUESTED PER BEST EFF(

General

federal political committee.

Other (specify)

Name of Employer

Primary

Receipt For: